

POSITION

INITIALS

ID NO.

DATE

FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

INDEX OF CLAIMS

✓ Rejected N Non-elected
 □ Allowed I Interference
 (Through numeral) Canceled A Appeal
 ○ Restricted O Objected

| Claim | Date | Claim | Date | Claim | Date |
|-------|------|-------|------|-------|------|
| 1 | | 51 | | 101 | |
| 2 | | 52 | | 102 | |
| 3 | | 53 | | 103 | |
| 4 | | 54 | | 104 | |
| 5 | | 55 | | 105 | |
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| 27 | | 77 | | 127 | |
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| 29 | | 79 | | 129 | |
| 30 | | 80 | | 130 | |
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| 45 | | 95 | | 145 | |
| 46 | | 96 | | 146 | |
| 47 | | 97 | | 147 | |
| 48 | | 98 | | 148 | |
| 49 | | 99 | | 149 | |
| 50 | | 100 | | 150 | |

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY